## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jan 20 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

P95000082182 (3)

ACADEMY BRIDGE SCHOOL, INC.

Principal Place of Business Mailing Address 1201 SOUTH OCEAN DRIVE 1201 SOUTH OCEAN DRIVE SUITE 2512 NORTH SUITE 2512 NORTH HOLLYWOOD FL 33019 DO NOT WRITE IN THIS SPACE HOLLYWOOD FL 33019 3. Date Incorporated or Qualified 10/25/1995 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 26 65-0617438 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 30 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 62 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 В3 84 City Zip Code 11. Pursuant to the provisions of Section office or registered agent, or both agent. I am familiar with, and accept 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, TITLE □ DELETE Change Addition 1.1 TITLE MORTON, FRED NAME 1.2 NAME 1201 SOUTH OCEAN DRIVE, #2512 NORTH STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33019 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3 4. CITY - ST - ZIP DELETE TITLE Change Addition 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 2IP DELETE TITLE 6.1 TITLE ☐ Change ■ Addition NAME 6.2 NAME

6.3 STREET ADDRESS

poport as required by Chapter 607, Florida Statutes; and that my name appears in

11.160

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this peport as required by Chapter 607, Florida Statutes; and that my name appears in